

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	A-S A-S	943 943	7-16-01 7-17-1 10-22-1
RESPONSE FORMALITY REVIEW			

3/18

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 -+ Restricted O Objected

Claim	Date
Final	
Original	
1	7-15-02
2	7-15-02
3	7-15-02
4	7-15-02
5	7-15-02
6	7-15-02
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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